



## ***Performance Report***

### ***Performance Period October 2003-December 2003***

## **Introduction**

Throughout this period the Department of Education continued to monitor performance and review practices and procedures necessary to sustain system infrastructure and performance necessary to meet the needs of students requiring educational and mental health supports. A dynamic management process is used to assist in administrative decision-making that ensures the meaningful application of resources, fiscal and human, to achieve high levels of student achievement. This process relies on data collected through multiple means to provide current information on system infrastructure and performance. During this quarter, the Department continued to refine data collection and analysis processes down to the school level to improve system responsiveness and to provide a clearer picture of system performance.

This report covers the Second Quarter of School Year 2003-2004. It is the sixth quarter under the Felix Consent Decree “Sustainability Period.”

## **Infrastructure**

The Comprehensive Student Support System (CSSS) continues to provide the requisite infrastructure for the provision of programs necessary to provide educational, social, and emotional supports and services to all students, affording them an opportunity to benefit from instructional programs designed to achieve program goals and standards. EDN150 allocations contain those resources, fiscal, human, material, procedural, and technological, important to the provision of appropriate supports and services to students within the Felix Class. The objective of EDN150 programs are to maintain a system of student supports so that any student requiring individualized support, temporary or longer term, has timely access to those supports and services requisite to meaningful achievement of academic goals.

The next segments of this section contains elements of the CSSS infrastructure determined to be essential to the functioning of a support system constituting an adequate system of care. During the course of the Felix Consent Decree, the Department routinely provided progress reports addressing the availability of qualified staff, funding, and an information management system (ISPED) as a means to provide information germane to assessing system capacity to provide a comprehensive student support system.

## **Population Characteristics**

The Department provides educational supports and services within CSSS levels 4 and 5 to approximately 14.8% of the total student enrollment. These are documented in Individualized Education Plans (IEP) or 504 Modification Plans (MP). Students receiving educational services through the Individuals with Disabilities Education Act

(IDEA) must first be determined to have a disability and, due to the disability, be in need of specialized instruction. Section 504 students: 1) must have a physical or mental impairment, which substantially limits one or more major life activities, or have a record of such an impairment; or 2) be regarded as having such an impairment, and be in need of modifications or supports to benefit from instruction. Of those students requiring CSSS supports in levels 4 and 5, 23,596 (87.9%) are IDEA eligible and 3,227 (12.1%) are eligible under Section 504.

Table 1 of this section delineates the numbers, relative percentage, and change from last report period by IDEA eligibility category. There was a net increase of 196 students eligible for and receiving IDEA services during this period. An increase of students from the first quarter through the second quarter is consistent with historical trends due to incoming and newly identified students. An increase of 319 students receiving special education and related services occurred since December 2002, even though the actual overall enrollment from SY 02-03 to SY03-04 has decreased.

Table 1: Change in Number and Relative Percentage of Students Eligible for Special Education; 12/02 – 12/03

Disability	12/01/02		9/30/03		12/30/03	
	#	%	#	%	#	%
Mental Retardation	2,155	9.26	2,005	8.6	2,009	8.5
Hearing Impairment	436	1.87	441	1.4	317	1.3
Speech/language Impairment	1,699	7.29	1,475	6.3	1,449	6.1
Other Health Impairment	1,884	8.09	2,195	9.4	2,305	9.8
Specific Learning Disability	11,327	48.7	10,122	43.3	10,252	43.5
Deaf-Blindness	3	.001	5	.0	6	.02
Multiple Disabilities	382	1.64	386	1.6	389	1.6
Autism	646	2.77	759	3.2	788	3.3
Traumatic Brain Injury	80	.34	82	.4	78	.3
Developmental Delay	1,412	6.06	2,729	11.7	2,719	11.5
Visual Impairment	82	.35	72	.3	77	.33
Emotional Disturbance	3,011	12.9	2,949	12.6	2,943	12.5
Orthopedic Impairment	115	.49	112	.5	112	.47
TOTAL	23,277		23,400		23,596	

Approximately 27.6% of students receiving educational supports and services also require related services to address social, emotional, or behavioral needs in order to make meaningful progress on goals identified in their IEP or MP. At the end of this report period, 81% (5,840) of those students were IDEA eligible while the remaining were 504 eligible. Over 4.2% of the total student enrollment require educational and related services to address educational and social, emotional, or behavioral needs in the educational arena, while over 9.7% of the entire student enrollment received some type of SBBH supports during this quarter.

Services provided to these students fall in two broad categories: School Based Behavioral Health (SBBH) Services and services to students with Autism Spectrum Disorder (ASD). While the determination of need for and type of SBBH or ASD service necessary for any individual student to benefit from their educational plan is made by a team during the development of the plan, guidelines regarding the provision of these services are in the joint DOE and DOH Interagency Performance Standards and Practice Guidelines.

*(134) The system must continue to hire and retain qualified teachers and other therapeutic personnel necessary to educate and serve children consistently*

*(Revised Felix consent Decree, July 1, 2000, page 20)*

### Qualified Staff

Qualified staff providing instructional and related services are the lynchpin of appropriate educational and related services for students with disabilities, for they are the ones with expertise and training in curriculum, instruction, and knowledge of the impact of the student's disability on the learning process. They, in conjunction with parents and others, develop and implement appropriate interventions designed to meet the unique needs of students.

The following staffing goals provide evidence that there are sufficient qualified teachers evenly distributed across the state to ensure timely access to specialized instruction for students and professional support to those providing educational and related services and supports to students with disabilities.

*Infrastructure Goal #1: Qualified teachers will fill 90% of the special education teacher positions in classrooms.*

The percent of qualified special education teachers provides an important measure of the overall availability of special education instructional knowledge available to support student achievement. Even with the increasing need for special education classroom teachers brought about by increased numbers of eligible students, the Department continues to meet this infrastructure goal.

At the end of this report period, there were 2,058 special education teaching positions. The 1,856 qualified special education teachers comprise (90.2%) of those teachers in special education classrooms. This is an increase of 81.5 qualified special education teachers over the same quarter last year and 95.5 since the beginning of the Felix Consent Decree "Sustainability Period."

	6/02	12/02	12/03
Allocated Positions	1,990.5	1,970.5	2,058
Filled Positions	1,933	1,924.5	2,017
Qualified Teachers	1,760.5	1,774.5	1,856
Percent Qualified Teachers	88.4%	90.1%	90.2%

The Department continues to employ 141 teachers through the contract with Columbus, an increase of 10 over last quarter. As projected, this is a decrease from the 195 teachers contracted through Columbus last year.

*Infrastructure Goal #2: 95% of the schools will have 75% or greater qualified teachers in special education classrooms.*

A previous benchmark set forth the target of no school with less than 75% qualified teachers in the classroom. In order to meet this goal, schools requiring less than four (4) special education teacher positions, 28% (72) of the schools, would be required to have all (100%) of the placed special education teachers qualified. The Department has determined a practical goal is that 95% of all schools will have 75% or greater qualified special education classroom teachers.

This measure provides information regarding the availability of special education knowledge and expertise to assist with day-to-day instructional and program decision making in support of special needs students. Meeting this goal is complicated due to the number of schools with few, two or less, full-time positions and half-time (0.5 FTE) positions. Nonetheless, the Department is within 2 schools of meeting this infrastructure goal.

The policy of targeted placement of qualified special education teachers in special education classrooms has helped to improve the percentage of schools with greater than 75% qualified teachers to 93.5% during this period. In September 2003 there were 18 schools with less than 75% qualified staff. In December 2003, there are 15. This is an improvement of seven (7) schools over December 2002.

	6/02	12/02	9/03	12/03
Number of schools with < 75%	21	22	18	15
Percent of schools with < 75%	91.9%	91.5%	93.5%	94.2%

The steadily decreasing number of schools with less than 75% qualified staff illustrates the Department's ability to place qualified staff hired at the beginning of the school year, in schools where their knowledge and skills will provide the greatest benefit to students. Directives and monitoring of teacher contracts and filling of vacant positions for the upcoming school year by Personnel Resource Officers, PROs, has positively impacted this infrastructure goal.

*Infrastructure Goal #3: 85% of the complexes will have greater than 85% or greater qualified teachers in special education classrooms.*

This measure helps illustrate the distribution of special education instructional expertise throughout the state. There is no previous court benchmark targeting staffing at the complex level. However, the prevalence of qualified staff throughout a complex is an indicator of the degree of support available to school staff and the continuity of instructional quality over time for students. For example, the impact of less than 75% qualified staff in a school within a complex with all other schools fully staffed is far less than if all schools in the complex had less than 75% qualified staff. Therefore, the Department has added this measure as an internal infrastructure indicator for monitoring.

	6/02	12/02	9/03	12/03
Number of complexes with over 85% qualified special education teachers	26	30	29	36
Percent of complexes with over 85% qualified special education teachers	72%	83%	71%	88%

The number of complexes with greater than 85% qualified staff remained similar during this quarter when compared to the same quarter last year. At the end of this quarter there were 29 complexes with greater than 85% qualified staff. This is short of the goal of 85% of the complexes meeting this target. This is attributed to the inaccurate projection of needed special education teachers within several complexes. Recognition of the inaccurate projection resulted in placement of qualified SPED teachers in those complexes.

*Infrastructure Goal #4: 95% of all Educational Assistant positions will be filled.*

Educational Assistants (EAs) provide valuable support to special education teachers and students throughout the school day and in all instructional settings. Since SY 01-02 the EA allocation ratio is 1:1 with the Special Education Teacher allocation. The 100% increase in positions exacerbated a problematic personnel recruitment process, namely recruiting and employing EAs through the Department of Human Resources Development (DHRD). The Department has added this infrastructure goal to monitor the employment rate of EAs.

At the end of December 2003 there are 2,385 EA positions, an increase of 96 positions, in schools, with 2,005 (84%) filled. The goal of 95% of EA positions filled was not met. Of the 2,385 EA positions, 1,950 are established and filled with civil service positions. This is an increase of 130 civil service EA positions over the last three months. As can be seen from the table below, the number of established EA positions and the number of filled EA positions have increased since September 2002.

EA Positions*	9/02	1/03	6/03	9/03	12/03
Established Positions	2,104	2,075	2,043	2,316	2,385
Filled Positions	1,701	1,709	1,818	2,016	2,005

\* The actual number of EA positions equals or exceeds the number of allocated special education teacher positions because EA positions may be reconfigured in order to maximize support availability during the time students are in class.

Analysis of the recruitment and retention of paraprofessional educators has shown that meeting this target in the immediate future will be a challenge for the Department. The goal of recruiting and retaining a highly qualified workforce requires the existence of a preservice training infrastructure and adequate compensation schedules; the Department either shares authority or is dependent upon another state agency in each of these areas. The traditional pool of paraprofessionals does not currently possess the requisite preservice training while those that do are able to find positions with more desirable compensation plans and are unavailable to the Department.

Therefore the Department has embarked on a training program that will provide newly hired employees with sufficient training to meet the goal of a highly qualified workforce. This is a several year project. To address the immediate needs, OHR has identified those complexes and PROs experiencing difficulties in hiring and is providing targeted assistance.

*HDOE will maintain sufficient SBBH staff to serve students in need of such services*

*Infrastructure Goal #5: 75% of the School-Based Behavioral Health professional positions are filled.*

Since December 2000, the Department has maintained that the use of an employee-based approach to provide School Based Behavioral Health (SBBH) services provides greater accessibility and responsiveness to emerging student needs. While it is anticipated that some degree of services will always be purchased through contracts due to uniqueness of student need and unanticipated workload increases, day-to-day procedures presume the availability of staff. Early planning anticipated a two to three year phase to reach the point at which employees would do 80% of the SBBH workload. Performance Goal #13 addresses the relative percent of work done by DOE employees and contracted providers.

The early use of exempt from civil service employees within SBBH dramatically exceeded initial expectations for the recruitment and retention of SBBH employees. Last year the conversion of “exempt” positions to civil service positions caused staff turnovers that challenged program managers to maintain services without disruptions. Special studies by the Department and the Felix Court Monitor were conducted to determine if a significantly lower number of actual employees jeopardized the delivery of services to students as envisioned by the SBBH Program Model. Both studies determined that active monitoring and proactive problem solving by SBBH Program Coordinators provided continuous services to students, even though the SBBH system continued to rely more heavily on contracted services than intended.

This Infrastructure Goal is met as 77% of all SBBH Specialist positions are currently filled. Ninety percent (90%) of all clinical psychologist positions are filled at this time as opposed to 85% in June 2002. In the year since December 2002 there have been an additional 39.5 SBBH Specialists and five (5) clinical psychologists hired. During this quarter 16 SBBH Specialists and four (4) clinical psychologists were added to the SBBH staffing. In fact, in December 2003 there are more DOE SBBH Specialists (226.5) providing services to students in schools than SBBH “Therapists” (223) in June 2002.

The Officer of Human Resources in cooperation with the Department of Human Resource Development is finalizing entry-level positions to increase the potential applicant pool. These positions will require greater on-the-job training and supervision and will acquire the necessary knowledge and skills through training.

*Infrastructure Goal #6: 80% of the identified program specialist positions are filled.*

This Infrastructure Goal is directly attributable to a previously established Felix Consent Decree benchmark based upon a determination by the Court Monitor that in



2000 the Department did not have sufficient program expertise in several areas. Recruiting and retaining leadership for these key program areas has been an ongoing challenge for the Department. The lack of in state programs providing terminal degrees, coupled with geographic isolation from institutes of higher education and recruitment constraints regarding pay based on experienced earned in other systems, has made it very difficult for the Department to hire program specialists capable of providing important leadership.

Three positions, Reading Specialist, ASD Specialists, and SBBH Specialist, are currently filled with temporarily assigned DOE program staff. The Reading Specialist position has been advertised and interviewed.

The Department continues to aggressively recruit ASD expertise from the mainland. During this quarter one on-site interview was conducted and another visit has been arranged.

On a very positive note, an Individualized Education Program (IEP) Specialist has been hired. Also, one of the two psychology positions created from the Functional Behavioral Assessment (FBA) Specialist position continues to provide training and SBBH program support. The second position has been re-advertised and has several applicants. The temporary assignment of an SBBH Program Coordinator to assume program administrative duties, the inclusion of SBBH Program Coordinators in all aspects of the SBBH program development, and continuous training of SBBH professionals providing services to students has allowed the program to continue to evolve in the manner planned.

The initial intent in this requirement to infuse programmatic expertise in the Department has only been partially successful. This infrastructure measure is not met. While each hired specialist has brought much needed knowledge and skills to the field, significant administrative duties and the challenge of providing immediate and profound impact on a large school system has tested each program specialist and reduced their overall effectiveness. Furthermore, increased levels of knowledge and skills possessed by Department staff and contractors has changed the type of expertise necessary to continue to foster system growth and improved performance. The system now requires experienced administrators, supervisors, and trainers of discrete intervention skills.

### Integrated Information Management System - ISPED

The need for an information management system to provide relevant data for analysis and decision-making is an important component of the infrastructure necessary to sustain high levels of system performance in the area of supports and services to students in need of such services. This information provides the basis for resource allocation, program evaluation, and system improvement.

Meaningful measurement of ISPED will provide specific information regarding the following: 1) ISPED data accuracy, 2) ISPED role in important management decisions, and 3) ISPED use by DOE administrators, CASs and principals.

*Infrastructure Goal #7:*

- a) 99% of special education and section 504 students are in ISPED,*
- b) 95% of IEPs are current, and*
- c) 95% of the IEPs are marked complete.*

The utility of ISPED as an information management system lies in the ability to provide a wide variety of users information that improves their productivity. Whether the information is unique student specific information used in program development or aggregate information used for planning purposes, accuracy and completeness is necessary. The three components embedded in Infrastructure Goal #7, when achieved and maintained, will give users confidence that accessed information will assist in good decision-making.

At this time 99% of all students eligible for special education and related services are registered in the ISPED system. During the last six months the percentage has ranged from 99% to 97%. Fluctuations are due to time lags in registering newly identified or recently enrolled students.

IEP Status	6/02	9/02	12/02	9/03	12/03
% Current IEPS in ISEP	74%	86%	97%	97%	99%
% IEPS marked "Complete"	62%	64%	67%	88%	94%

**ISPED Status and Capacity Development Actions :**

Improved ISPED functioning has permitted ISPED administrative activities during this quarter to encompass additional capacity development activities. Improvements expand the archive capacity to make it more responsive and dependable as the volume of data contained within ISPED continues to expand. Additional improvements ensure that Office of Special Education, U.S. Department of Education, data requirements are met.

*Infrastructure Goal #8: ISPED will provide reports to assist in management tasks.*

The increased administrative need for timely and accurate information is very evident in the ISPED reports. At this time, there are 87 reports available to teachers and administrative staff. During this quarter many reports were reviewed to ensure that school specific information was easily obtained and understood by a wide variety of new users.

*Infrastructure Goal #9: School, district, and state level administrators will use ISPED.*

ISPED provides DOE administrators 87 real time reports designed to assist in measuring system performance at the school, complex, and state levels, as well as provide data for resource allocation. The Department began tracking administrator "log-ons" to ISPED as broad indicators of both the utility of the reports as well as administrative behavior regarding the use of data in proactive management.



The table below depicts the tremendous increase by Principals, District Education Specialists (DES), and Complex Area Superintendents (CAS).

Table: Administrative "Log-ons" to ISPED

	6/02	12/02	9/03	12/03
CAS	0	36	6	58
DES	3	101	194	259
Principals	29	457	746	884

These numbers represent a 60% increase in ISPED use by Complex Area Superintendents in the year from December 2002 to December 2003. Similarly, DES and principal use increased 156% and 93%, respectively, during the same period.

This data suggest that the action plans generated through the Special Education Section designed to improve overall system performance has had an impact on administrative behavior regarding the use of data in decision making and monitoring the impact of system performance activities. The Department expects to see these numbers increase as the school year continues.

*(135) The system must be able to continue to purchase the necessary services to provide for the treatment of children appropriate to the individual needs of the child*

*Infrastructure Goal #10: The Department will maintain a system of contracts to provide services not provided through employees.*

During this report period the DOE has maintained 49 contracts with 26 different private agencies to provide SBBH services, including Community-Based Instruction Programs, and ASD on an as needed basis. New contracts took effect during this report period. There are nine (9) types of contracts covering the following services: assessments, behavioral interventions, intensive services, psychiatric services, and five (5) for Community-Based Instruction (CBI) services. Listed below is the number of contracts by type of service.

Type of Service	Number of Contracts
Assessment	10
Behavioral Intervention	11
Intensive Services	12
Psychiatric Services	8
CBI (ages 3-9)	1
CBI (ages 10-12)	2
CBI (ages 13-200)	3
CBI (gender specific)	1
CBI (ASD/SMR)	1

During the first five months of SY 03-04 the Department contracted services for ASD students at an average expenditure of approximately \$2.6M per month, \$13,250,788 total. The present rate of expenditure is slightly over 20% higher than the average expenditure during SY 02-03. Data for December 2003 is not complete but appears to support this trend. This is due to an increased number of students with ASD requiring contracted services. This data excludes expenditures from Kauai.

Purchased contracted SBBH services during the first five months of SY 03-04 totaled \$2,330,849, averaging approximately \$466,000 per month. This is significantly less than the average of \$1,000,000 per month during SY 02-03. An increase in the number of SBBH employees providing services to students reduced the need for contracted services.

*Infrastructure Goal #11: Administrative measures will be implemented when expenditures exceed the anticipated quarterly expenditure by 10%.*

The broad programmatic categories within EDN150 are Special Education Services, Student Support Services, Educational Assessment and Prescriptive Services, Staff Development, Administrative Services, and Felix Response Plan. EDN150 allocations for all of these groups total slightly more than \$288M dollars for SY 03-04. This represents the same amount of funding available since SY 02-03.

Through September 2003 just over \$67M (23%) was expended. It increased in line with projections to \$144,183,302 through December 2003.

Only the Special Education Services expenditures collectively exceeded projected expenditures. An analysis of the spending indicated that this was due to a large expenditure of funds related to services with ASD. Budgetary adjustments have been made to address continued increased expenditures in this area and an emergency appropriation of \$3M has been submitted to the Legislature.

## Key Performance Indicators

The existence of an adequate infrastructure is not an end in and of itself. The true measure of the attainment of EDN150 program goals and objectives are in the timely and effective delivery of services and supports necessary to improve student achievement. While the measurement of student achievement lies within the purview of classroom instruction, key system performance indicators exist that provide clear evidence of the timeliness, accessibility, and appropriateness of supports and services provided through EDN150 and the responsiveness of CSSS to challenges threatening system performance.

*(136) The system must be able to monitor itself through a continuous quality management process. The process must detect performance problems at local schools, family guidance centers, and local service provider agencies. Management must demonstrate that it is able to synthesize the information regarding system performance and results achieved for students that are derived from the process and use the findings to make ongoing improvements and, when necessary, hold individuals accountable for poor performance.*

*(Revised Felix consent Decree, July 1, 2000, page 20)*

*Performance Goal #1: 90% of all eligibility evaluations will be completed within 60 days.*

Good practice and regulation expect timely evaluation to provide the foundation for an effective individualized education or modification program that will assist

students achieve content and performance standards. This measure identifies the timeliness with which the system provides this information to program planners.

Since June 2002 the Department has made steady progress in meeting this performance goal. During this quarter 95.5% of the 3420 evaluations were completed within 60 days.

	6/02	12/02	9/03	10/03	11/03	12/03
Number of evaluations	1737	1371	483	803	1192	1425
% Completed within 60 days	92%	91%	86%	94%	95%	97.5%

The number of complexes able to meet the performance goal has also increased over the past 18 months. The Department met this goal in each of the three (3) months this quarter.

	6/02	12/02	12/03
Number of complexes over 90%	30	21	39
Percent of complexes over 90%	75%	52%	97.5%

The Special Education Section, in cooperation with District Education Specialists, developed Action Plans in June 2003 and continues to implement the action plans to address uneven performance in this area. This action plan provides school administrators with tools and training to analyze school data and performance of timely evaluation and plan development for students. It also identifies those schools with persistent underperformance, for targeted technical assistance in analyzing data and making corrective actions. Twice monthly updates and analysis with school level details are provided to the CAS.

*Performance Goal #2: There will be no disruption exceeding 30 days in the delivery of educational and mental health services to students requiring such services.*

A service delivery gap is a disruption in excess of 30 days of an SBBH or ASD related service identified in an IEP or MP. A “mismatch” in service delivery (i.e., counseling services expected to be provided by an SBBH Specialist actually delivered by a school counselor) is included in this category as a service delivery gap.

Service delivery gaps occur for a variety of reasons but are due primarily because an individual related service provider (i.e., SBBH contractor) is temporarily unavailable to provide the requisite service as opposed to “wait lists” which are due to the unavailability of a program of educational services. Last school year there were only a few students for whom a program, CBI, was not available. Increased CBI capacity was developed through new contracts and the issue is resolved.

	6/02	12/02	9/03	12/03
Number of service gaps	26	25	16	6

With the stabilization of SBBH employees during the second semester of SY 02-03, the number of gaps has decreased. There is an average of 10 gaps a month

compared to 14 gaps a month one year ago. This is markedly better than the 48 gaps reported in September 2001.

Gaps were identified in three distinct areas: skills trainers, medication monitoring, and individual/group ongoing interventions. These gaps tend to occur in geographically isolated areas.

During the last quarter, there were isolated difficulties in accessing medication-monitoring services in some locations. An immediate solution was achieved when the contractor hired an additional psychiatrist. However, the Department continues to explore cooperative agreements with other state agencies providing psychiatric services as a long-term solution.

A shortage of Skills Trainers, direct service providers to students with Autism Spectrum Disorders (ASD), appears to be emerging. During this quarter, 12 gaps (36%) were due to a shortage of Skills Trainers. Contractors report a high turnover rate and difficulties in training new employees. The ASD action plans, further delineated under Performance Goal #12, provide both immediate and long-term answers to this problem.

Specific to the issue of Skills Trainers, the ASD action plan targets immediate capacity development activities in those areas reporting service delivery gaps due to the lack of available skills trainers. The development of capacity among DOE staff augments the skills trainers' capacity among contractors and provides flexibility to meet those times of high demand. Additionally, there are regular meetings with District Autism Consulting Teachers and contractors regarding service coordination.

*Performance Goal #3: The suspension rate for students with disabilities will be less than 3.3 of the suspension rate for regular education students.*

In August, the Felix Consent Decree Court Monitor and Plaintiffs' Attorneys expressed concerns relative to the suspension of students with disabilities. The Court Monitor questioned the applicability of using as a target the 3.3 rate reported in the Government Accounting Office (GAO) report of 2001 based on serious misconduct, while the Plaintiffs' Attorneys speculated that suspension rates may be indicative of inadequate programs for students with disabilities. The findings of that special study, as reported in the July 2003-September 2003 Quarterly Performance Report, are included in this report for the purpose of providing background information to readers without access to the initial report.

### **Background**

The suspension rate of special education students relative to their regular education peers had received attention prior to the Felix Monitoring Office study in November 2000. Of primary concern to the study was whether or not special education students were suspended more frequently than their non-disabled peers. At that time, there was little data available for an adequate comparison beyond the Department's own historical data.

This present investigation into the use of suspension by HDOE schools in response to students with disabilities misconduct concentrates on the following three questions:

1. Is the Department, or schools, suspending special education students at a higher rate than nationally?
2. Is the Department, or schools, more likely to suspend special education students than regular education students?
3. Has the Department's efforts since 2001 had an impact?

There is some information external to the DOE for comparison. The aforementioned GAO study, January 2001, Student Discipline, provides insight related to serious misconduct during SY 99-00. While the study intended to provide a nationally representative sample, the GAO reports the response rate to this survey by middle and high schools was insufficient to draw such conclusions. Nonetheless, this survey provides insight into the suspension rates of regular and special education students and the percentage of schools with higher rates of serious misconduct.

A more recent study, the Special Education Elementary Longitudinal Study (SEELS) reports parent information regarding the number of suspensions experienced by students with disabilities aged 6-12. This study does purport to be nationally representative.

### **Findings**

1. Is the Department, or schools, suspending special education students at a higher rate than nationally?

#### **There are two (2) possible comparisons :**

- A. The GAO survey of 272 middle and high schools indicated that on average the incidence of suspension for serious misconduct for regular education students was 15/1,000 and 50/1,000 for special education students. It also revealed that 31% of the schools reported greater than 10 incidents per year for regular education students while 15% reported over 10 incidents per year for special education students.

In HDOE schools, the regular education suspension rates for SY 01-02 and SY 02-03 were 24.5 and 28.8, respectively. Similarly, the incidence of suspension for special education students was 62.8 and 74.04 for the same years, respectively. The incidence of suspension was, on average, 1.78 times higher for regular education students and 1.37 times higher for special education students than that reported in the GAO study for their peers.

It should also be noted; more secondary schools in Hawaii reported over 10 incidents per year (SY 01-02 and SY 02-03) for regular education students, 71% and 84%, over special education students, 60% and 65%, respectively.

Assuming relatively uniform application of Chapter 19 procedures, the higher number of incidents per campus would appear to indicate more frequent serious misconduct by both regular and special education students on middle and high school campuses.

While the GAO study cautions that it cannot be used as a national sample due to smaller than desired return rates, it is clear that HDOE middle and high schools suspend students, both regular and special education, for serious misconduct, at a greater rate than the respondents in the GAO survey. One should also be mindful that the GAO survey was in SY 99-00 while the Department's data is from the two subsequent years.

- B. Parents responding to the SEELS survey indicated that approximately 8% of their special needs children were suspended for misbehavior during the most recent school year. The survey sample was developed to allow comparisons nationally. That response equates to a suspension rate slightly higher than 80/1,000 special education students.

The suspension rate for elementary aged special education students during SY 02-03 was just over 40/1,000 (about 4%). 104 (61%) of the elementary schools did not suspend a special education student last year, as opposed to 96 (56%) that did not suspend a regular education student. Only 28 (16%) of the elementary schools has a suspension rate equal to or greater than parents reported in the SEELS survey.

Based on this information, it does not appear that HDOE elementary schools, as a group, overly rely upon suspension as a response to misconduct by special education students.

2. Is the Department, or schools, more likely to suspend special education students than regular education students?
- A. The GAO study of serious misconduct in middle and high schools indicated that the rate of suspension for special education students was 3.3 times higher than the rate of suspension for regular education students.

An investigation into the suspensions for "Class A Offenses" under Chapter 19 similar to those termed "serious misconduct" in the GAO study was done for SY 01-02 and SY 02-03. The incidence of suspension rate for "Class A Offenses" in HDOE middle and high schools during SY 02-03 was 2.57 and in SY 01-02 was 2.56, much lower than national survey sample for "serious misconduct" at 3.3.

01-02	Suspensions	Population	Rate/1K
Reg Ed	1,767	71,993	24.5
Sp Ed	718	11,412	62.8

02-03	Suspensions	Population	Rate/1K
Reg Ed	2,058	71,463	28.8
Sp Ed	885	11,953	74.04

Note: These numbers are for distinctly middle and high school campuses.



During SY 01-02 there were 24 (33%) middle and high schools with the suspension rate for special education students higher than 3.3. In SY 02-03, it dropped to 22 (30%) of the schools, even though the number of suspensions for each group rose. Eight (8) schools were over 3.3 for both years. Of those, the rates for 5 schools dropped.

Again, with the understanding that the GAO survey has limitations due to return rate, it would appear that the HDOE middle and high schools do not disproportionately suspend special education students for serious misconduct at a higher rate than the GAO survey schools. In fact, in spite of the generally high rates for suspension mentioned previously, the risk rate for suspension for special education students is approximately one half of that found for the mainland schools.

The incidence of suspension “risk rate” for all types of Chapter 19 offenses at the secondary level is 2.53. However, the overall rate of suspension for all offenses is obviously much higher for all students, regular and special education, 123/1,000 and 313/1,000, respectively, than for serious misconduct.

#### B. Elementary aged students

The use of relative suspension rates in small schools is somewhat misleading in that the suspension of only one or two students drastically changes the incidence of suspension for either the regular education or special education students. This is true whether it is within a single month or the entire school year. Also, the suspension of a single student or several students, regular or special education, within an entire school year is not sufficient to determine a pattern with regards to addressing student misconduct.

Unfortunately the SEELS data does not speak to the relative rate of suspension for regular and special education students for misconduct and there is no information external to Hawaii for comparison. In previous reports, the Felix Monitoring Office used 2.5 times, November 2000, and 3.0 times, April 2002, as indicators of disproportionately high rates for special education student suspensions over those of their regular education peers.

The table below depicts the distribution of the number of special education suspensions, suspension rate per 1,000 special education students, and relative risk rate compared to regular education students.

<b>SY 01-02</b>	<b>0-2</b>	<b>3+</b>	<b>&lt;40</b>	<b>&lt;80</b>	<b>&gt;80</b>	<b>&gt;3.0</b>
Number	127	46	123	15	35	63
%	73	27	71	9	20	36

<b>SY 02-03</b>	<b>0-2</b>	<b>3+</b>	<b>&lt;40</b>	<b>&lt;80</b>	<b>&gt;80</b>	<b>&gt;3.0</b>
Number	134	39	132	11	28	46
%	77	23	77	6	16	27

In SY 01-02 99 (57%) and SY 02-03 104 (60%) of the elementary schools did not suspend any special education students. Over 70% of the elementary schools suspended special education students 2 times or less.

It is predictable then that over 70% of the elementary schools also have suspension rates below the state average of 40/1K special education students. Only 35 (20%) of the elementary schools had suspension rates for special education students over the SEELS published rate of 80/1K. This number dropped for elementary schools in Hawaii to 27 (16%) schools in SY02-03.

The aggregate suspension "risk rate" for elementary aged special education students is 6.0. Based on the Court Monitor's April 2002 use of a risk rate of 3.0 there were 27 elementary schools at the end of SY 02-03 whose use of suspension for addressing special education misconduct bears further investigation. This number is down from the 36 schools the previous years.

3. Has the Department's efforts since 2001 had an impact?

The impact of Departmental efforts to address the suspension of special education students is included within the greater issue of school safety and the suspension of all students. At the secondary level, the low and decreasing relative risk rate for special education student suspensions provides evidence that school administrators and staff are attentive to special education student support and programming needs that may have an effect on student misconduct.

At the elementary school level, most schools do not suspend special education students, evidencing that efforts to improve the school response to student misconduct has been effective. The increasing number of schools that do not suspend and decreasing number of schools with relative risk rates above 3.0 again suggests that Departmental efforts are making a difference.

### **SY 03-04 2nd Quarter Suspension Data**

Cumulatively by the end of this quarter, 128 schools reported suspending students. Of those, 57 were elementary schools, 33 middle schools, and 38 high schools. In 24 (23%) of those schools, there were no special education students suspended. In all, 173 (64%) of all schools did not suspend any special education students.

While 20 elementary schools suspended special education students at a rate higher than the 3.0 used in the April 2002 Court Monitor report as a rate signifying the need for further information, only 8 of those schools had more than 3 suspensions of special education students cumulatively this school year. In other words, 95% of elementary schools used suspension in response to misconduct by special education students less than 3 times this school year.

For middle schools, 24 (73%) of the schools that reported using suspensions had a special education suspension rate below 3.0. At the high schools, 23 (60%) had a special education suspension rate below 3.0.

The suspension rate is dropping after an initial high rate during the first few months of this school year. The monthly rate for all schools in December 2003 was 2.85, down from 3.65 in September 2003. Similarly, the cumulative rate in December 2003 is 3.40 as opposed to the cumulative rate in September 2003 of 3.65.

*Performance Goal #4: 99.9% of students eligible for services through special education or Section 504 will have no documented disagreement regarding the appropriateness of their educational program or placement.*

There are two sources of documented disagreements. One is a formal written complaint mechanism. By regulation, formal written complaints must be addressed within 60 days. The second is the Request for an Impartial Hearing. The decision by an Administrative Hearings Officer is to be issued within 45 days of the filing of a request.

### **Special Study on Complaints as an Indicator of Program Adequacy**

In an August 13, 2003 letter, the Plaintiffs' Attorneys expressed concern regarding the number of requests for due process hearings, students on Home/Hospital Instruction, and suspensions, suggesting they may be indicative of inadequate programs for students with special education and mental health services. An analysis of these factors was done to ascertain the extent to which these indicators imply the need for improvements in the delivery of special education and related services.

While the number of due process hearings held during SY 02-03 was higher than those reported nationally, it was consistent with the previous years. A more thorough discussion regarding the number of requests for administrative hearings was made available to the court in June 2003.

A recent GAO report released in September 2003, reported on Dispute Resolution under IDEA using data from 2000. In that report, the GAO calculated that nationally the number of due process hearings was 5 per 10,000 students with disabilities. Additionally, it was estimated that there were 10 complaints and 7 mediations per 10,000 students with disabilities. In that report the GAO concluded that high concentrations of hearings in a few localities were indicative of multiple influences in the decision to request a hearing.

Based on the GAO study the Department should have anticipated as many as 300 formal objections to the provision of FAPE to students with disabilities.

### **2nd Quarter Results**

There were 30 (28 requests for hearings and 2 written) formal complaints this quarter, down from 69 the previous quarter. The Department met this goal during this quarter, as 99.9% of the students receiving services during this quarter had no documented disagreements.

### **Complaints**

The number of formal written complaints regarding the delivery of mandated services and supports to students continues to be extremely low. During the 2<sup>nd</sup> Quarter of SY03-04, the Department received two (2) written complaints.

Quarter	1 <sup>st</sup> SY 02-03	2 <sup>nd</sup> SY 02-03	3 <sup>rd</sup> SY 02-03	4 <sup>th</sup> SY 02-03	1 <sup>st</sup> SY 03-04	2 <sup>nd</sup> SY 03-04
Number	2	1	0	3	5	2

The Special Education Section, Complaints Office, also receives telephone inquiries regarding the delivery of educational services and supports to students with disabilities. These inquiries do not rise to the level of a formal complaint but nonetheless provide additional information regarding the degree to which school and complex staff are effective in communicating with parents regarding the educational needs, characteristics, and subsequent educational program decisions for students. There were 18 such calls during the 1<sup>st</sup> quarter and 15 such calls during this quarter. During the first two quarters of SY 02-03 there were 15 and 13 such calls, respectively.

### **Requests for Impartial Hearings**

The number of requests for impartial hearings has been steadily increasing from 1997 to 2002, at which point it stabilized. An analysis of requests for impartial hearings and the outcomes was submitted to Court in June 2003. The Department increased facilitation and mediation resources available to schools as an initial step to assist parent and school problem solving related to the provision of specialized instruction and related services. While it is too early to gauge the degree of success, preliminary results from this quarter are encouraging.

Month	SY 01-02	SY 02-03	SY 03-04
October	9	26	9
November	25	14	12
December	14	14	7
Total	48	54	28

*Performance Goal #5: The rate of students requiring SBBH, ASD, and/or Mental Health Services while on Home/Hospital Instruction will not exceed the rate of students eligible for special education and Section 504 services requiring such services.*

During the 3<sup>rd</sup> and 4<sup>th</sup> quarters of SY 02-03, there were a total of 24 different special education students receiving Home/Hospital Instruction (H/HI). There were 17 and 14 special education students on H/HI in the 3<sup>rd</sup> and 4<sup>th</sup> quarters of SY 02-03, respectively. Two (2) students were on during both quarters. The average student was on H/HI for 6 weeks. One school had 3 students on H/HI during this period. Only 5 (21%) of the students were suspended during SY 02-03. That is a suspension rate of 208/1,000, less than the average incidence of suspension rate for special education students.

### **2<sup>nd</sup> Quarter SY 03-04 H/HI**

The number of students receiving Home/Hospital Instruction (H/HI) increased from 91 to 176 during the 2<sup>d</sup> quarter of this school year. However, the number of students (176) on H/HI during the 2<sup>nd</sup> quarter of SY03-04 is well below the 230 in

the 2<sup>nd</sup> quarter of the previous school year. There were 176 students on H/HI during this quarter, 75 were students with disabilities. Of the 75 students with disabilities on H/HI, 15 (20%) required SBBH services. The percentage of students with disabilities in other educational arrangements with either SBBH or Mental Health in their educational plans is 27% statewide. This goal is met.

Quarter	1 <sup>st</sup> Qtr SY 02-03	2 <sup>nd</sup> Qtr SY 02-03	3 <sup>rd</sup> Qtr SY 02-03	4 <sup>th</sup> Qtr SY 02-03	1 <sup>st</sup> Qtr SY 03-04	2 <sup>nd</sup> Qtr SY 03-04
Total # students on H/HI	173	230	232	227	91	176
# Students with disabilities on H/HI	90	112	125	107	37	75
% Of students with disability on H/HI requiring SBBH or Mental Health	13%	16%	14%	23%	13.5%	20%
State % of students with disabilities receiving SBBH or Mental Health	45%	33%	33%	32%	32.5%	27.5%

The number of students placed in H/HI due to social or emotional needs increased this quarter. As can be seen in the table below, the number of students requiring H/HI due to social or emotional needs doubles in the second quarter beyond that in the previous first quarter.

Quarter	1 <sup>st</sup> SY 02-03	2 <sup>nd</sup> SY 02-03	3 <sup>rd</sup> SY 02-03	4 <sup>th</sup> SY 02-03	1 <sup>st</sup> SY 03-04	2 <sup>nd</sup> SY 03-04
Number of Students	7	14	17	14	8	18

*Performance Goal #6: 100% of complexes will maintain acceptable scoring on internal monitoring reviews.*

There were 19 complexes that conducted integrated internal monitoring reviews. 18 of those complexes scored in the acceptable range. One complex scored one point below the acceptable score. Please refer to Section II, Internal Monitoring for October 2003 monitoring results and information.

*Performance Goal #7: 100% of the complexes will submit internal monitoring review reports in a timely manner.*

Of the 19 complexes that completed an integrated internal monitoring review, 13 internal monitoring review reports were due. All 13 were submitted in a timely manner. There were no internal monitoring review reports due this quarter.

*Performance Goal #8: State Level feedback will be submitted to complexes following the submittal of internal monitoring review reports in a timely manner.*

Five (5) complex integrated internal monitoring review reports required state level feedback regarding the scope and adequacy of the report and intended improvement actions. All five (5) feedback reports were 3 weeks late. The lateness was due to a combination of holiday breaks and the dual commitment of the responsible staff to

training and be responsible for other compliance or quality monitoring related activities. This further illustrates the need for dedicated staffing to monitoring activities.

*Performance Goal # 9: “95% of all special education students will have a reading assessment prior to the revision of their IEP.”*

The Stanford Diagnostic Reading Test (SDRT) is the reading assessment used prior to the annual revision of the IEP. It is recommended that the assessment be administered within 90 days of the IEP. The SDRT is a group-administered, norm-referenced multiple-choice test that assesses vocabulary, comprehension, and scanning skills. The SDRT is not, nor is it intended to be, an adequate measure for a complete understanding of the student's PLEP. This is because, although diagnostic, the SDRT also falls into the category of summative assessments. A summative assessment is generally a measure of achievement or failure relative to a program or grade level of study.

Students exempted from the SDRT may need alternative (not alternate -- that refers to the state high stakes testing), formative assessments to guide instruction. This might be any combination of teacher observation, a one-on-one reading conference, the Brigance, etc.

The compliance rate is markedly improved over the first six (6) months of the sustainability periods but still falls short of the Department's goal.

Reading Assessment Completion Rates

	July	Aug	Sept	Oct	Nov	Dec
SY 02-03	29%	37%	58%	62%	64%	61%
SY 03-04	32%	55%	79%	84%	86%	84%
Increase	3%	18%	21%	22%	22%	23%

The Special Education Section action plan addresses the completion rate of SDRT administration prior to IEP team meetings. Additional training is targeted to schools to ensure that responsible school staffs are familiar with the SDRT and the use of SDRT data in IEP development. Additionally, the SDRT completion rates are one of the performance goals targeted for state level monitoring and targeted assistance to complex staff engaged in supporting identified schools in need of improvement. New ISPED reports now contain SDRT completion rates available at the state, district, complex, and school level. These reports, when combined with reports identifying IEPs that are scheduled for annual review, monitored by State Special Education staff have led to an increase in the degree of compliance with this important performance measure but further school level attention is required to meet this goal.

*Performance Goal# 10: 95% of all special education teachers will be trained in specific reading strategies.*

Training of special education teachers was a two-year project. Approximately one half was to be trained in each year. Cohort 1 includes 942 special education teachers. This cohort received training during the SY 2001-2002. Cohort 2 was comprised of 1134 special education teachers trained during the SY 2002-2003 (2<sup>nd</sup> and 3<sup>rd</sup> Quarter).



This target has been met and continues to be met as all newly hired special education teachers are currently being trained in the same curriculum as initially used. The initial round of training will be completed by October 2003 with the second installment beginning in January 2004. Teachers are taught (a) reading strategies and assessment and (b) the direct link between them and writing effective IEPs containing specific reading strategies and assessments for special education students. Of the 399 new teachers in special education classrooms, 389 (97%) have completed the first phase of training in specific reading strategies. This performance goal is met.

*Performance Goal #11: 90% of all individualized programs for special education students will contain specific reading strategies.*

To determine the degree of compliance with this expectation, Reading Resource Teachers in the Special Education Section randomly selected 10 IEPs per complex written during the month. The selected IEPs are reviewed for evidence of the inclusion of specific reading strategies.

Performance in this area dipped during the first quarter but improved during this quarter. It is likely that the combination of summer hires and new teachers contributed to decreased performance and training and corrective actions have been successful. This performance indicator is met.

Reading Strategies in IEPs	July	Aug	Sept	Oct	Nov	Dec
# with reading strategies	312	366	421	456	440	376
% with reading strategies	79%	91%	87%	91%	90%	92%

*Performance Goal #12: System performance for students with Autism Spectrum Disorder will not decrease.*

The Department continues to use the Internal Review process as an indicator of system performance related to students with ASD. In the second quarter there were case reviews of 21 students with autism spectrum disorder (ASD) during the internal review process from October 2003 to December 2003. This sample of 21 students represents 2 % of the IDEA students identified as students with ASD: 1 (5%) are preschool students, 15 (71%) are elementary students, 3 (14%) are middle school students, and 2 (10%) are high school students. Twenty-one (21) (100%) were rated as acceptable in both the child status and system performance. When comparing October 2002 to March 2003 case reviews of 40 students, and the external monitoring review conducted in November 2003 with case reviews of 16 elementary students with ASD, the data demonstrates that there has been sustained levels of acceptable services across all indicators to students with ASD and their families.

	SY 99	SY 00	Oct. 02 – Mar. 03	Oct. 03 – Dec. 03	Nov. 03 External Review
<b>Indicators of Current Child Status</b>					
27. Learning Progress			100	95	100
28. Responsible Behavior			100	100	93
29. Safety (of the child)			97	100	93
30. Stability			95	100	93
31. Physical Well-Being			97	100	100
32. Stability			100	100	100
33. Caregiver Functioning			100	100	100
34. Home Community (LRE)			100	100	100
35. Satisfaction			97	100	86
<b>36. OVERALL CHILD STATUS</b>			<b>100</b>	<b>100</b>	<b>100</b>
<b>Indicators of Current System Performance</b>					
44. Child/Family Participation	90%	96%	97	100	100
45. Functioning Service Team	79%	84%	100	100	100
46. Focal Concerns Identified	83%	90%	100	100	100
47. Functional Assessments	78%	88%	97	100	100
<b>48. OVERALL UNDERSTANDING</b>	<b>81%</b>	<b>91%</b>	<b>100</b>	<b>100</b>	<b>100</b>
49. Focal Concerns Addressed	81%	90%	97	100	100
50. Long Term Guiding view	65%	76%	92	100	93
51. Unity of Effort Across Agencies/Team	63%	79%	89	100	100
52. Individual Design/Good Fit	71%	84%	100	100	100
53. Contingency Plan (Safety/Health)	78%	95%	79	100	91
<b>54. OVER ALL PLANNING</b>	<b>67%</b>	<b>88%</b>	<b>97</b>	<b>100</b>	<b>100</b>
55. Resource Availability for Implementation	68%	83%	100	95	100
56. Timely Implementation	73%	82%	100	95	93
57. Adequate Service Intensity	67%	84%	100	95	93
58. Coordination of Services	63%	85%	97	100	93
59. Caregiver Supports	74%	89%	100	90	93
60. Urgent Response	87%	93%	100	100	89
<b>61. OVERALL IMPLEMENTATION</b>	<b>71%</b>	<b>89%</b>	<b>100</b>	<b>95</b>	<b>100</b>
62. Focal Situation Change	84%	91%	100	100	93
63. Academic Achievement	79%	86%	100	100	100
64. Risk Reduction	84%	90%	100	100	93
65. Successful Transitions	72%	88%	97	100	87
66. Parent Satisfaction	70%	88%	97	100	87
67. Problem Solving	72%	89%	100	100	100
<b>68. OVERALL RESULTS</b>	<b>75%</b>	<b>90%</b>	<b>100</b>	<b>100</b>	<b>93</b>
<b>69. OVERALL PERFORMANCE</b>	<b>68%</b>	<b>90%</b>	<b>100</b>	<b>100</b>	<b>100</b>

The districts have developed draft action plans covering quality student support and staff development/capacity building. In an effort to address gaps in services each district has outlined a plan to increase the number of employees to deliver skills trainer and autism consultation services now being provided by contracted personnel. Discussions at the state level with personnel and budget to help facilitate the hiring of these new employees are currently being undertaken. In February-March 2003 state level special education personnel will meet in the districts with all Complex Area Superintendents, the District Educational Specialists overseeing autism and Autism Consulting Teachers review these action plans.

All of the Best Practice Guidelines are still in the working draft process. Work continues in monthly meetings with each committee.

Districts continue with their training efforts and as supported by the data presented here it has had a positive effect on the outcomes for students. The district and school level employees working with students with ASD are to be commended for their continued efforts to provide an appropriate education for their students with ASD.

*Performance Goal #13: The SBBH Program performance measures regarding service utilization will be met.*

Over the past 18 months the Department has developed the capacity to monitor trends in service utilization and provision, as well as to better coordinate service delivery, maximize resources, and ensure students needing SBBH assistance are provided the required services. A year ago, SBBH program coordinators developed a data collection system to track utilization of services. In September 2003, the data log was further expanded to more effectively track student entrances to and exits from the SBBH system, to assist with supervision, and to provide some measure of efficacy. This necessitated rapid and massive training of all DOE role groups who provide services to Felix Class students on the use of the revised data log. Further training and clarification will further maximize end user familiarity and data accuracy. Meanwhile, collaborative efforts continue with Office of Information and Technology Services, as well as ISPED, CSSS and SPED staff to enhance the Department's capacity to collect information and to generate the desired reports for monitoring, analysis, and appropriate follow-up.

In keeping with the original vision, the SBBH Program provides, as available and appropriate, support to the emotional health and academic growth of ALL students through an array of services and supports that are integrated throughout the levels of CSSS. As Behavior Health Specialists become a more integral and visible resource within the school system, they are collaborating with teachers, administrators, counselors and social workers to promote positive student psychological-social development, address barriers to learning, and enhance the general well-being of students, families, and school staff. SBBH staff are also beginning to provide the necessary and informal services for the majority of students in the school, with emphasis placed on prevention, early intervention and risk reduction. These services include consultation, observation, classroom guidance instruction, functional behavioral assessments/behavior support plans, and other behavioral and social

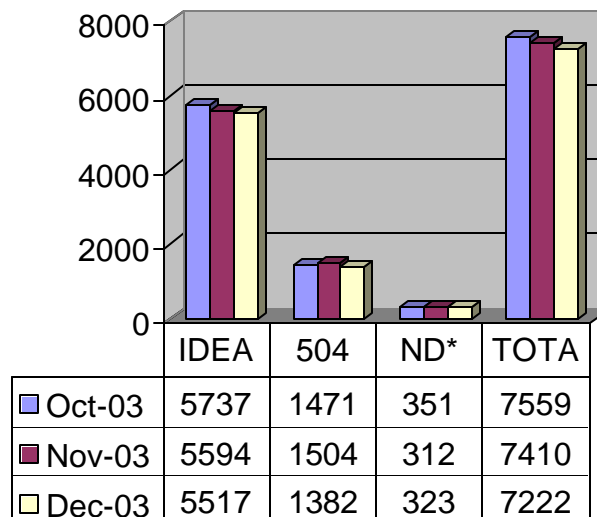
supports to classroom teachers and students. These preventative and early intervention supports and services are part of a comprehensive system of care.

New data collection on SBBH services to non-Felix Class students was incorporated in the revised log in late September 2003 to more accurately reflect the number of students benefiting from SBBH services. As illustrated in the table below, the same staff providing SBBH services to Felix-Class students also reported statewide provision of over 20,000 hours of SBBH services to 10,995 non-Felix class students in November. In December, a month shortened by Winter Break, 10,092 hours of SBBH services were provided to 10,983 non-Felix-Class students throughout the state. These services included individual, classroom, and consultation supports. This is in addition to services provided by other counselors who do not serve Felix-Class students.

	No. NON-FELIX student served	No. Hrs provided to NON-FELIX
October	1,995.0	3,211.3
November	10,995.0	20,021.8
December	10,983.0	10,092.2
Totals	23,973.0	33,325.3

As seen in the chart below, of the total number of Felix-Class students, an average of 74 % are IDEA students and an average of 19% are 504 students. Seven percent (7%) of students receiving formal SBBH services had no designation (ND) to indicate whether they are 504 or IDEA. Previously, approximately 83% of the students receiving SBBH services were IDEA eligible while 17% were students requiring 504 accommodations.

**Felix Class Students Receiving SBBH Services**



\* no designation

In October 2003, a total of 7,559 students received formal SBBH services such as individual counseling, group counseling, family counseling/parent training, medication monitoring, and participation in Community-Based Instruction/Enhanced Learning Centers. This number constitutes an increase of 323 students when compared to the 7,236 students who received services in September. These numbers may be related to increased user familiarity since the implementation of the revised and expanded log in late September. In November, 7,410 students received SBBH services, a decrease of 149 students. December's total of 7,222 students indicates a decrease of 188 students receiving formal SBBH services.

Over the last 18 months, the number of students identified as "Felix Class" serviced through SBBH has decreased from a high of 10,440 in July 2002 to 8,360 in March 2003 to 7,222 in December 2003. Whether these numbers represent a decrease in services however must be evaluated in light of the approximately 10,000 students per month receiving SBBH services prior to the time consuming application of administrative procedures previously deemed necessary before implementation of the SBBH program. In June 2001, just prior to the implementation of SBBH services, there were just under 14,000 students receiving mental health services through the Child and Adolescent Mental Health Division. This past month over 17,000 students benefited from SBBH services alone.

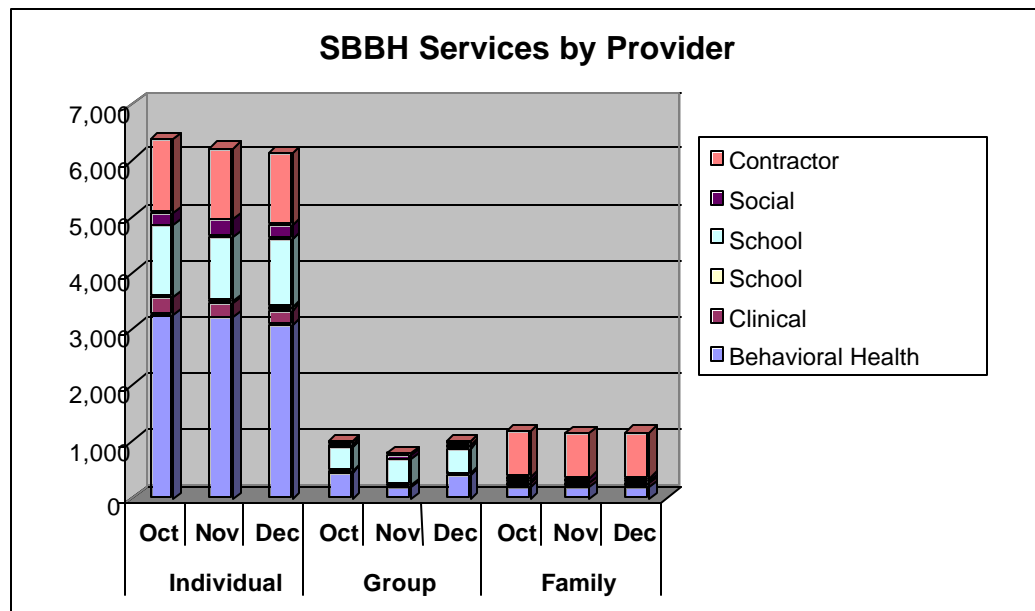
<b>SBBH Students/Services October-December 2003</b>						
	<b>Total # of SBBH Students</b>	<b>Individual Counseling</b>	<b>Group Counseling</b>	<b>Family Counseling</b>	<b>Medication Management</b>	<b>CBI/TC/ ELC*</b>
<b>October</b>	7559	6420	1047	1220	1048	213
		<b>85%</b>	<b>14%</b>	<b>16%</b>	<b>14%</b>	<b>3%</b>
<b>November</b>	7410	6224	992	1162	1056	286
		<b>84%</b>	<b>14%</b>	<b>16%</b>	<b>14%</b>	<b>4%</b>
<b>December</b>	7222	6131	987	1176	102	307
		<b>85%</b>	<b>14%</b>	<b>16%</b>	<b>15%</b>	<b>4%</b>
<b>Average</b>	<b>7397</b>	<b>6258</b>	<b>1008</b>	<b>1186</b>	<b>1052</b>	<b>269</b>
		<b>85%</b>	<b>14%</b>	<b>16%</b>	<b>14%</b>	<b>4%</b>

\*Community Based Instruction/Therapeutic Classroom/Enhanced Learning Center etc.

Individual counseling continues to be the most frequently used and on-going intervention for 85% or an average of 6,258 students per month. Family counseling is an adjunct to individual counseling for 16% or an average of 1,186 student/families per month. Group counseling is the method of intervention for 14% or an average of 1,008 students each month. An average of 1,052 or 14% of students receive medication management. Four percent (4%) or an average of 269 students are reported in this past quarter as having received intensive DOE services. Compared with previous quarterly reports, there is a trend toward individual services from group and family interventions.

According to the graph, the number of students in CBI appears to be increasing. In analyzing this trend, caution should be exercised in that the numbers reflect changes in the data collection instrument. In prior quarters, only students placed in CBI were counted. However, as these figures did not accurately reflect the numbers of

students receiving more intensive DOE services, the data collection instrument was changed to also include students receiving Therapeutic Classroom (also called Enhanced Learning Centers and Intensive Learning Centers) services. Services in these programs are inclusive and intensive. Capturing only the quantity of traditional methods of service such as individual or group counseling is not a good indicator for the level of care or intensity of services provided to these students. Consequently, CBI numbers include more than the students placed in CBI. The increase in numbers reflects this as staff adjust to the new definition of the category.



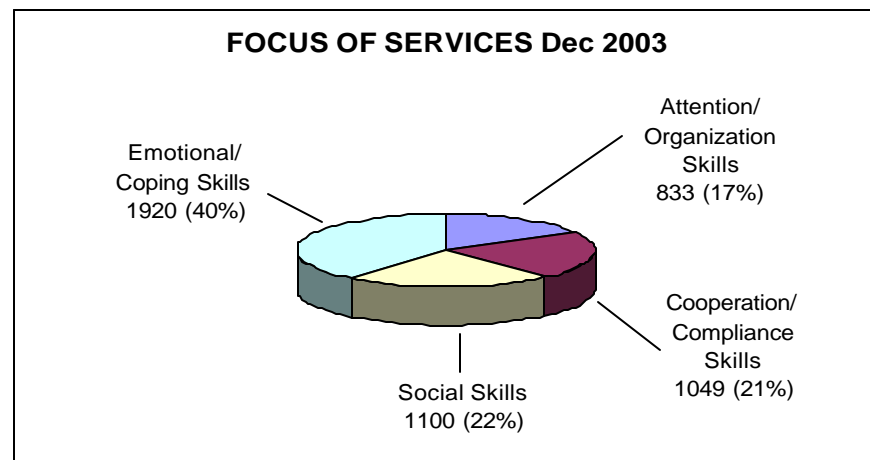
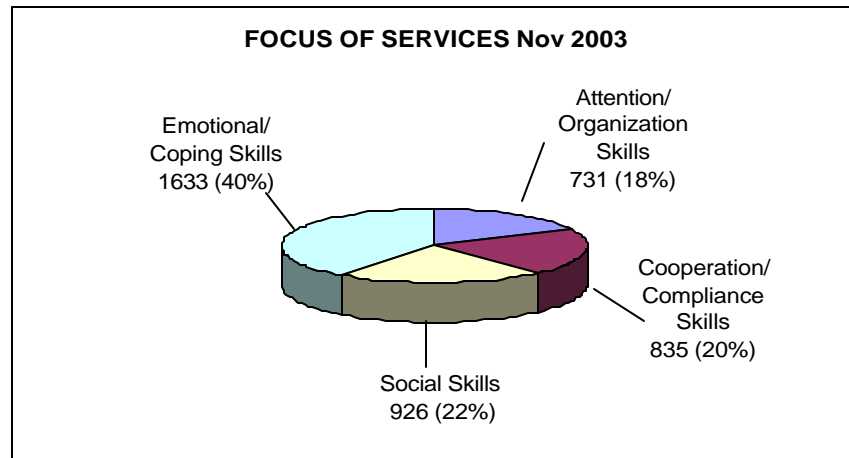
SBBH SERVICES BY PROVIDER TYPES OCT-DEC 2003									
	Individual			Group			Family		
	Oct	Nov	Dec	Oct	Nov	Dec	Oct	Nov	Dec
<b>Contracted Provider</b>	<b>1300</b>	<b>1294</b>	<b>1278</b>	<b>31</b>	<b>47</b>	<b>50</b>	<b>818</b>	<b>802</b>	<b>817</b>
Social Worker	258	293	240	60	62	62	87	84	77
School Counselor	1233	1149	1231	412	449	440	11	6	8
School Psychologist	21	9	39	4	4	4	2	0	2
Clinical Psychologist	303	288	283	39	36	37	69	63	67
Behavior Specialist	3265	3191	3060	442	194	394	203	207	205
<b>DOE Subtotal</b>	<b>5080</b>	<b>4931</b>	<b>4853</b>	<b>957</b>	<b>949</b>	<b>937</b>	<b>372</b>	<b>360</b>	<b>359</b>
	<b>80%</b>	<b>79%</b>	<b>79%</b>	<b>97%</b>	<b>96%</b>	<b>95%</b>	<b>30%</b>	<b>31%</b>	<b>31%</b>
<b>TOTAL</b>	<b>6380</b>	<b>6224</b>	<b>6131</b>	<b>988</b>	<b>992</b>	<b>987</b>	<b>1190</b>	<b>1162</b>	<b>1176</b>

As mentioned earlier under Infrastructure Goal # 5, it was the Department's goal to have 80% of the services provided through employees. As seen in the charts above, this program development goal is nearly met as Department of Education staff provides most of the interventions, with the exception of family services. Contracted



providers frequently provide family services. DOE staff provides an average of 79% of the individual counseling, with Behavior Specialists delivering 51% and counselors delivering 19% of this service. Contracted providers deliver 21% of the individual counseling. DOE staff are the primary providers of 96% of group services. Behavior specialists and counselors provide an average of 85% of such group services. DOE staff provide 31% of family counseling services, with the balance provided by contracted providers and DOH.

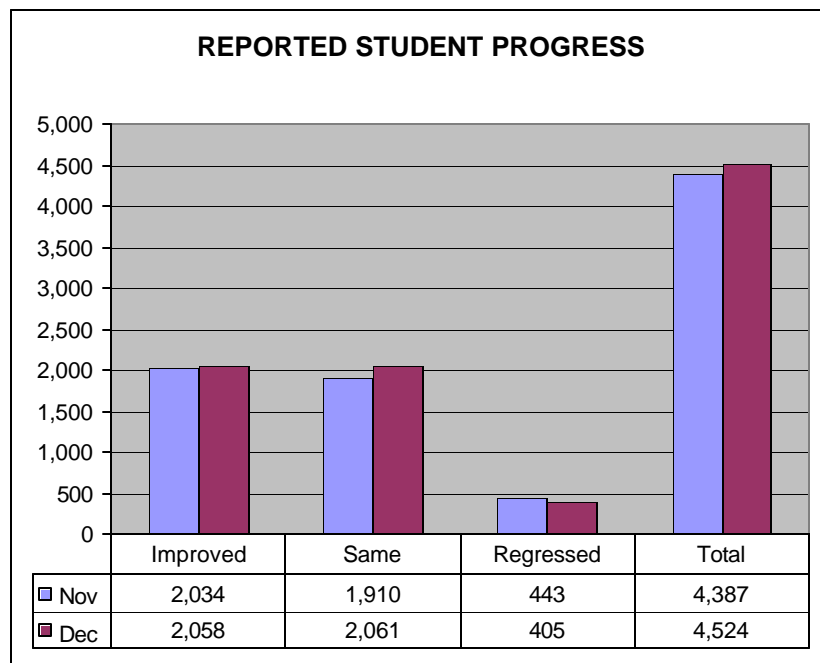
Psychologists also facilitated and completed 1,013 Functional Behavioral Assessments from October through December 2003.



Focus of services to Felix-Class students receiving SBBH services was reported for 4,125 students in November. November focus of services included Attention/Organizational skills for 731 students (18%), Cooperation/Compliance skills for 835 students (20 percent), Social skills for 926 students (22%), and Emotional/Coping skills for 1,633 students (40%). In December, DOE staff reported the focus of services for 4,902 students. Of this number, 833 students (17%) received services focused on improving attention/organizational skills, 1,049 students (21%) were focused on cooperation/compliance skills, 1,100 students (23%) were focused on Social skills development, and 1,920 students (39%) worked on Emotional/Coping skills.

Staff also reported student progress on the part of 4,387 students in November and 4,524 students in December. Among those served in November, 2,034 students showed improvement, 1,910 students experienced no significant change, and 443 students regressed. December figures reflected a similar ratio: 2,058 students were reported as improved, 2,061 students experienced no significant change, and 405 students regressed.

These numbers represent 60% to 63% of the student population who receive SBBH services and are consistent with the independently collected indicators of progress as reported through the TRF of the ASEBA discussed in Performance Goal #14.



In tracking students new to SBBH and those who are exiting from SBBH services, sub-categories are noted. The data log differentiates those students who are new to SBBH services (New) from those who are current SBBH but new to a provider or school (Transferred In). Students exiting from SBBH are categorized by those who have achieved their goals versus those who moved or their parents decline the service.

Students Entering and Exiting SBBH Services					
Month/Year	ENTERING			EXIT	
	New	Transferred In	Met Goals	Moved, etc.	Parent Declined
Oct-03	149	194	163	342	42
Nov-03	198	178	73	221	64
Dec-03	164	134	122	152	54
<b>Subtotal</b>	<b>511</b>	<b>506</b>	<b>358</b>	<b>715</b>	<b>160</b>
<b>QTR TOTAL</b>	<b>1017</b>		<b>1233</b>		

Information below was selected and included because of the disproportionate percentages. Further analysis and discussion are warranted to explore how the Department can better support these groups as well as maximize use of all resources, including community and other agencies, as appropriate.

	TOTAL	GENDER*		FREE LUNCH
		Male	Female	
Oct-03	7559	70%	25%	54%
Nov-03	7410	71%	26%	56%
Dec-03	7222	70%	26%	56%

Collaboration with the Office of Information and Technology Services, as well as SPED, CSSS and SPED staff, constitutes an ongoing effort in building the DOE's capacity to electronically and systematically collect quantitative and qualitative data from all provider sources, including contractors. A user-friendly electronic data collection would result in more comprehensive, detailed reports for analysis and utilization in program management, detection of areas that warrant improvement, and correction.

*Performance Goal # 14:*

- a) *60% of a sample of students receiving SBBH services will show improvement in functioning on the Teacher Report form of the Achenbach.*
- b) *Student functioning as described on the Achenbach TRF scores on students selected for Internal Reviews will be equivalent to those of national sample.*

**Background**

The School-Based Behavioral Health (SBBH) program was implemented in the Department in July of 2001. Since the onset, it has been important to demonstrate that students identified as in need of SBBH services have timely access to those services, and that those with key roles in identification and provision of such services have the requisite knowledge and skills to insure effectiveness. Another issue is to assure that services are targeted to those students who in fact do need such interventions.

The Achenbach System of Empirically Based Assessment (ASEBA), a clinically based rating scale, is currently being utilized as an objective measure of student status in adaptive and maladaptive functioning and changes over time. The ASEBA is supported by a large research base attesting to its validity and is a straightforward scale easy to complete by professionals having knowledge of the student. It is also used by the CAMHD to measure improvements in child functioning.

*Performance Goal :#14*

- a) *60% of a sample of students receiving SBBH services will show improvement in functioning on the Teacher Report form of the Achenbach.*

In May 2003, the ASEBA was administered to a random selection of 10% of the student population then receiving SBBH services. The initial data regarding this sample scores are available in the integrated Performance Monitoring Report, April 2003-June 2003. At that time approximately a third of the students receiving SBBH services scored in a

range suggesting little or no need for SBBH services. This is not an anomaly, but reflects a series of IEP decisions based on professional recognition of actual SBBH needs arrived at through an evaluation of the student as a whole, while also reflecting a professional willingness to provide services to students who in some cases may have relatively less severe needs.

From the point of view of IEP team responsibilities, it should be noted that while use of rating scales including the ASEBA does lend objective structure to IEP determination of student SBBH needs, under sound professional practice such scales are only one of several sources of information. While they do provide a check on professional judgment, they are not used as a substitute for professional judgment, in making team recommendations.

The original ASEBA sample of 715 students declined to 414 students, down 301 from the original sample. The sample declined for such reasons as students meeting SBBH goals and exiting, graduations, out-of-state moves, drop-outs or other reasons.

Thirty-five (35) students in the original sample either graduated or no longer require SBBH services based upon IEP decisions. These students, while a follow up score was not calculated, were included as students showing improvement. The scores of an additional 240 students in the sample still requiring SBBH services show improvement (i.e., reflected less need for "clinical attention" than the score 6 months earlier). In total 275 students of the 414 students for whom a "progress determination" was possible showed improvement.

Performance Goal #14a is met since 66% of the randomly selected group of students show improvement in functioning over a six month period. Even if the students for whom IEP team decisions and graduation are dropped from the group of students showing improvement a full 58% of the available sample showed improvement.

*b) Student functioning as described on the Achenbach TRF scores on students selected for Internal Reviews will be equivalent to those of national sample.*

In order to provide ongoing information regarding the determination of IEP and 504 Modification Team decisions regarding the need for SBBH services, the ASEBA TRF is currently being administered to appropriate students selected as part of the statewide Internal Review process. During this quarter, a TRF was completed and scored on 114 students selected for Internal Reviews. A TRF was not completed on those randomly sample excluded students for whom it is not appropriate (i.e., significant cognitive impairments or ASD) or students receiving services through CAMHD for whom a TRF is completed quarterly.

The ASEBA national norms have a mean of 50, and standard deviation of +/- 10 for the T Scores. The ASEBA norming sample for the TRF consists of 2,319 age 6-18 year old students selected from the national population.

Both Internalizing and Externalizing T Scores (54.2 and 56.7) are within one standard deviation of the national mean of 50. Expressed as percentiles, the ranking is at the 67th and 75th percentiles, respectively on the national norms. ASEBA scores are such that higher scores represent a greater frequency or intensity of concerns measured.

The T Scores of 54.2 and 56.7 compared to a national sample are slightly elevated. This finding is commensurate with reasonable expectations, considering that some elevation is expected since the large majority of the students in the sample are receiving SBBH services and are likely to have elevated scores as a function of their qualification for the program.

Furthermore, those students in the sample receiving special education services but not SBBH services are recognized as being at risk for need for such services.

### **Follow Up Data Regarding ASEBA TRF Scores And SBBH Service Delivery**

Pursuant to the June sustainability report, an inquiry was made into the level of service intensity provided to students in the initial ASEBA sample. This investigation was to determine whether this group does receive services commensurate with the higher level of need suggested by the June sample ASEBA scores. Provision of more intense services are measured by the number of SBBH service types provided, e.g., Individual Counseling, Group Counseling, Family Counseling and Medical Management. In addition, Community Based Instruction (CBI) is a measure of a higher intensity service. Therapeutic Classrooms and Enhanced Learning Centers are reported under CBI.

Hypothetically, students who have lower perceived symptoms (T scores of 54 or below) may be expected to receive a commensurately lower proportion of total services provided to the sample of 414 students. Conversely, the proportion of the sample scoring in the clinical range may be expected to be receiving a disproportionately greater share of the overall services provided to the sample population.

<b>ASEBA JUNE SAMPLE</b> <b>(December Internalization Scores): Intensity of Services</b> <b>Service Types Provided By ASEBA Range, With Totals and Percentage</b>									
	<b>N</b>	<b>Percent</b>	<b>Individual Counseling</b>	<b>Group Counseling</b>	<b>Family Counseling</b>	<b>Medical Management</b>	<b>CBI</b>	<b>Total Services</b>	<b>Percent</b>
Clinical range (T of 65 or above)	86	20.8	62	13	16	9	2	102	22.6
Border-line (T of 55-64)	110	26.6	78	16	17	11	3	125	27.7
Low (T of 54 or below)	218	52.7	142	28	31	22	1	224	49.7
Total	414	100.0	282	57	64	42	6	451	100

These tables (Internalization scores above and Externalization below) enable a comparison between the proportion of students within each of the three ASEBA outcome ranges, to the proportion of services being provided to such students.

Inspection of the data reveals that there is little difference between the service proportion received by the low population and the clinical population. Specifically, while the low scoring population represents 52.7 percent of the sample, they receive 49.7 percent of the services. The most clinically needy population, 20.8 percent of the sample, receives 22.6 percent of the services.

The following table, (Externalization scores) provides similar information. The population scoring in the low range, 40.1 percent of the sample receives 37.7 percent of the services. The most clinically needy population, 24.6, receives 25.5 percent of the services.

SAMPLE ASEBA (December Externalization): Intensity of Services									
Service Types Provided By ASEBA Range, With Totals And Percentage									
	N	Percent	Individual Counseling	Group Counseling	Family Counseling	Medical Management	CBI	Total Services	Percent
Clinical range (T of 65 or above)	102	24.6	72	13	17	8	5	115	25.5
Border-line (T of 55-64)	146	35.6	101	23	26	15	1	166	36.8
Low (T of 54 or below)	166	40.1	109	21	21	19	0	170	37.7
Total	414	100.0	282	57	64	42	6	451	100.0

There appears to be tendency to provide more intensive services for the population identified by the ASEBA as having greater concerns, but its manifestation is quite small in the December scores of the sample selected in May and reported in June for a determination of “progress” in functioning as indicated on the TRF of the ASEBA. A further investigation is required to ascertain if this small indication of service differentiation is an artifact of the manner in which the type of service is recorded (i.e., individual counseling as opposed to social skills training or qualifications of the SBBH provider selected to provide services).

*Performance Goal #15: System performance for students receiving SBBH services will not decrease.*

In order to continue to provide quality services to students requiring SBBH services, significant training is provided to school and complex staff. One hundred sixty-four (164) formal training sessions on Functional Behavior Assessment, Reactive Attachment Disorder, Related Services-SBBH, Building Relationships w/ parents, Drug Prevention Workshop, Discipline w/ Dignity, Stress Management, Classroom Management & Effective Teaching of Students w/ Emotional Problems, Brain Injury, Working w/ Depressed Children & Adolescents in School,



Breakthrough for Youth, Engagement Skills, Intensive Case Management, General Dynamics of Child Sexual Abuse, Non-violent Crisis Intervention, Suicide/Risk Assessment, Clinical issues, Disruptive Behaviors, Interagency Practices, Quality Assurance, Deepening Relationships, Overindulged Children, Internal Review Training, FSC training, ISPED, Chapter 56 and 53, supervision, and more were provided to 2924 DOE staff from October through December 2003. Training occurred in all districts with the average quality measures of 4.5 on a 5-point scale.

In addition to subject-focused group training sessions, ongoing professional supervision monitors the application of training into service delivery. Currently, District level School Psychologists, Clinical Psychologists, Program Managers (MHS1) and some Complex level School Psychologists provide ongoing supervision and consultation, in addition to direct services to students. The SBBH data collection system is designed and utilized as a supervision as well as management tool. In November, 60 Psychologists and Supervisors reported 999 supervision and training sessions were provided to staff. In addition, psychologists and program managers provided 1809 consultations, completed 345 assessments, 198 FBAs, and 320 counseling sessions. Although December was a short month due to the holidays, 64 psychologists and other supervisors reported 717 supervision/training sessions, and 1601 consultations, in addition to 290 assessments, 136 FBAs, 269 counseling sessions and other services.

Although supervision is provided in all districts, as part of the SBBH Strategic Plan, Program Coordinators have targeted institution of consistent supervision procedures statewide to better monitor the timely, effective and efficient delivery of SBBH services.

Another broad measure of system performance is the use of case study data through the Internal Review process. During the October-December period, utilizing a standard protocol, data was collected on system performance in 19 complexes based on system activities directly related to the student's needs and services. In a sample of 284 students, 167 were identified in need of educational and behavioral health services. Information collected provided valuable insight for program evaluation of the statewide system. However, caution must be exercised in drawing conclusions regarding a discrete program component such as SBBH, which does not stand apart from the whole system; it is part of the system. Nevertheless, the data assists program managers and school staff to track improvement and identify areas of program performance warranting attention as they relate to students with behavioral health needs.

The following table provides information based on the percentage of 167 sample students receiving SBBH services. It also provides a comparison with the previous sample from School Year 02-03 and the overall sample results. Based on these results, note that percentages increased in all the indicators as well as the overall performance from School Year 02-03 to the current sample. Also note that percentages were comparable if not slightly greater when compared to the overall current sample.

INDICATORS OF CURRENT SYSTEM PERFORMANCE		Acceptable Performance	
		SBBH only	Total Internal Review Results
	School Year 02-03	10-12/2003	10-12/2003
<i>Understanding the Situation</i>	<b>88%</b>	<b>94%</b>	<b>94%</b>
Child/Family Participation	93%	96%	95%
Functioning Service Team	90%	95%	94%
Focal Concerns Identified	84%	89%	90%
Functional Assessments	80%	90%	91%
<i>Planning Services</i>	<b>83%</b>	<b>93%</b>	<b>92%</b>
Focal Concerns Addressed	88%	89%	90%
Long Term Guiding View	75%	87%	88%
Unity of Effort Across Agencies/Team	78%	87%	87%
Individual Design/Good Fit	89%	94%	94%
Contingency Plan (Safety/Health)	77%	95%	93%
<i>Implementing Services</i>	<b>89%</b>	<b>96%</b>	<b>94%</b>
Resource Availability for Implementation	92%	95%	94%
Timely Implementation	87%	95%	93%
Adequate Service Intensity	78%	93%	92%
Coordination of Services	85%	92%	90%
Caregiver Supports	91%	97%	96%
Urgent Response	81%	96%	97%
<i>Results</i>	<b>90%</b>	<b>94%</b>	<b>93%</b>
Focal Situation Change	88%	91%	89%
Academic Achievement	86%	86%	87%
Risk Reduction	90%	93%	93%
Successful Transitions	90%	92%	91%
Parent Satisfaction	93%	96%	95%
Problem Solving	85%	88%	88%
<b>OVERALL PERFORMANCE</b>	<b>88%</b>	<b>96%</b>	<b>95%</b>

The improvement over last school year results is a result of the SBBH staff training and increased stability and familiarity with SBBH procedures. SBBH is actively working on a 3-year Strategic Plan to build upon the strengths evident in the system and to continue to improve overall performance. Focus is on the seamless integration of SBBH throughout CSSS as evidenced by tangible and observable application of quality student supports in every classroom, school and complex. Additionally, the goal is for all school staff to know and utilize a broad and integrated spectrum of social, behavioral, and academic supports/services along the five levels of the CSSS continuum. Professional development and coordination are essential in achieving this goal.

## Summary

The Department of Education has set high expectations regarding infrastructure and performance goals. Ongoing measurement of performance related to the goals indicate that over the past 18 months the Department has not only maintained infrastructure and performance, but strengthened existing infrastructure and improved performance.

The Department meets or exceeds infrastructure expectations in the following areas:

- Qualified personnel, special education teachers and SBBH professionals,
- Capacity to contract for necessary services not provided through employees,
- Adequate funding to provide a comprehensive system of care for students requiring such services to benefit from educational opportunities, and
- Integrated data management information to adequately inform administrative decisions necessary to provide timely and appropriate services.

Only the attainment of infrastructure goals related to hired EAs and Program Specialists remain elusive.

Performance Measures reveal improvement in all areas. The following Performance Measures were met or exceeded:

- Timely evaluation and program plan development
- Service delivery gaps
- ISPED utilization
- ISPED reports for management
- Availability of contracts to provide services
- Administrative action to assure adequate funding
- Use of Home/Hospital Instruction
- Training in reading strategies
- Quality of services to students with ASD
- Quality and availability of SBBH services
- Internal Monitoring Activities

While performance is high and improving in these areas, the Department performance goal in the following area is not met: Reading Assessments and Strategies.

Overall, in this reporting period the Department has continued to sustain a level of infrastructure and system performance consistent with or better than a year ago and even last quarter. Corrective actions directed at state, complex, and school level, based on data and analysis are leading to improvements not just at the complex level but within specifically identified schools. The data in this section provides further evidence of the commitment within the Department at all levels to maintain and improve the delivery of educational and behavioral/mental health services to students in need of those services beyond that required by federal statute and court orders.